

IP



<b>REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY</b>	Application Number	10/690,346
	Filing Date	10/21/2003
	First Named Inventor	Monica Cleghorn
	Art Unit	unknown
	Examiner Name	unknown
	Attorney Docket Number	CLEG: 1000 (125162.00004)

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☐ I hereby appoint the practitioners at Customer Number :

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Jackson Walker LLP				
Address	2435 North Central Expressway				
Address	Suite 600				
City	Richardson				
Country	USA	State	TX	ZIP	75080
Telephone	972-744-2940	Fax	972-744-2909		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

<b>SIGNATURE of Applicant or Assignee of Record</b>			
Name	Monica Martino (formerly Monica Cleghorn)		
Signature			
Date	5-17-04	Telephone	972-390-2610

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*



**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

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Filing Date	10/21/2003
First Named Inventor	Monica Cleghorn
Art Unit	unknown
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Attorney Docket Number	CLEG: 1000 (125162.00004)

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
Raffi J. Gostanian, Jr.	42,595
Robert C. Klinger	34,365
Michael G. Cameron	50,298
T. Ling Chwang	33,590

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

☒ Firm or  
Individual Name

Jackson Walker LLP

Address 2435 North Central Expressway

Address Suite 600

City Richardson State TX ZIP 75080

Country USA

Telephone 972-744-2940 Fax 972-744-2909

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**SIGNATURE of Applicant or Assignee of Record**

Name Monica Martino (formerly Monica Cleghorn)

Signature

Date

5-17-04

Telephone

972-390-2610

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms are submitted.

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